

106TH CONGRESS
1ST SESSION

H. R. 2870

To amend title XVIII of the Social Security Act to provide for coverage of vision rehabilitation services under the Medicare Program.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 15, 1999

Mr. CAPUANO (for himself, Mr. CLAY, Mr. DELAHUNT, Mr. FROST, Mr. LAFALCE, Ms. LEE, Mr. GONZALEZ, Mr. MCGOVERN, Mr. MOAKLEY, Mr. OLVER, Mr. PASCARELL, Ms. PELOSI, Mr. TIERNEY, Mr. TOWNS, and Mr. WEINER) introduced the following bill; which was referred to the Committee on Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend title XVIII of the Social Security Act to provide for coverage of vision rehabilitation services under the Medicare Program.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “**Medicare Vision Reha-**
5 **bilitation Coverage Act of 1999**”.

1 **SEC. 2. MEDICARE COVERAGE OF VISION REHABILITATION**
 2 **SERVICES.**

3 (a) **COVERAGE.**—Section 1861(s)(2) of the Social Se-
 4 curity Act (42 U.S.C. 1395x(s)(2)) is amended—

5 (1) by striking “and” at the end of subpara-
 6 graph (S);

7 (2) by striking the period at the end of (T) and
 8 inserting “; and”; and

9 (3) by adding at the end the following new sub-
 10 paragraph:

11 “(U) vision rehabilitation services (as defined in
 12 subsection (uu)(1)).”.

13 (b) **SERVICES DESCRIBED.**—Section 1861 of such
 14 Act (42 U.S.C. 1395x) is amended by adding at the end
 15 the following new subsection:

16 “Vision Rehabilitation Services; Vision Rehabilitation
 17 Professional

18 “(uu)(1) The term ‘vision rehabilitation services’
 19 means a program of restorative services (as determined
 20 by the Secretary in regulations) furnished by a vision re-
 21 habilitation professional (as defined in paragraph (2)) to
 22 an individual diagnosed with a vision impairment (as de-
 23 fined in paragraph (3)) to promote the independence of
 24 the individual notwithstanding such impairment, such
 25 services furnished pursuant to a plan of care established

1 by a physician (as defined in paragraphs (1) or (4) of sub-
2 section (r)).

3 “(2) The term ‘vision rehabilitation professional’
4 means an individual who—

5 “(A) is an orientation and mobility specialist or
6 a rehabilitation teacher;

7 “(B) holds a baccalaureate or higher degree
8 granted by a regionally accredited college or univer-
9 sity in the United States (or an equivalent foreign
10 degree) in rehabilitation, education, or related health
11 field with a university-based program of study and
12 clinical experience in orientation and mobility (as de-
13 fined in paragraph (4)(A)) or rehabilitation teaching
14 (as defined in paragraph (4)(B)); and

15 “(C)(i) is licensed or certified as vision rehabili-
16 tation professional by the State in which the services
17 are performed; or

18 “(ii) in the case of an individual in a State
19 which does not provide for such licensure or certifi-
20 cation, is certified by the Association for Education
21 and Rehabilitation of the Blind and Visually Im-
22 paired or meets such criteria as the Secretary estab-
23 lishes in consultation with the following:

24 “(I) The National Vision Rehabilitation
25 Cooperative.

1 “(II) The Association for Education and
2 Rehabilitation of the Blind and Visually Im-
3 paired.

4 “(III) National organizations representing
5 consumers and the elderly.

6 “(IV) Such other organizations as the Sec-
7 retary determines appropriate.

8 “(3)(A) The term ‘vision impairment’ means that an
9 individual is blind or partially sighted.

10 “(B) The term ‘blind’ means blind within the mean-
11 ing of ‘blindness’ as that term is defined in section
12 216(i)(1).

13 “(C) The term ‘partially sighted’ means functional vi-
14 sion impairment that constitutes a significant limitation
15 of visual capability resulting from disease, trauma, or con-
16 genital condition, that cannot be fully ameliorated by
17 standard refractive correction, medication, or surgery, and
18 that is manifested by one or more of the following:

19 “(i) Insufficient visual resolution.

20 “(ii) Inadequate field of vision.

21 “(iii) Reduced peak contrast sensitivity.

22 “(4)(A) The term ‘orientation and mobility’ means
23 the following services:

24 “(i) Assessment of needs of an individual who
25 has a vision impairment for skills training in meth-

1 ods of safe movement and in strategies to gather re-
2 quired environmental and spatial information.

3 “(ii) Development of appropriate integrated
4 service plans tailored to meet such needs identified
5 pursuant to an assessment under clause (i).

6 “(iii) Provision of training in and utilization
7 of—

8 “(I) equipment and adaptive devices in-
9 tended and designed for use by such an indi-
10 vidual; and

11 “(II) specialized techniques adapted for
12 such individuals, including orientation, sensory
13 development, systems of safe movement (includ-
14 ing long cane techniques), resource identifica-
15 tion, professional referrals (as appropriate),
16 and, in applied settings reinforcing instruction
17 for the use of optical devices as prescribed by
18 optometrists and ophthalmologists.

19 “(iv) Evaluation of such an individual receiving
20 training under clause (iii).

21 “(B) The term ‘rehabilitation teaching’ means the
22 following services:

23 “(i) Assessment of needs of an individual with
24 a vision impairment for skills training in inde-
25 pendent living and communications.

1 “(ii) Development of appropriate integrated
2 service plans tailored to meet such needs identified
3 pursuant to an assessment under clause (i).

4 “(iii) Provision of training in, and utilization
5 of—

6 “(I) equipment and adaptive devices in-
7 tended and designed for use by such an indi-
8 vidual, including, in applied settings, reinforcing
9 instruction for the use of optical devices as pre-
10 scribed by optometrists or ophthalmologists;
11 and

12 “(II) specialized techniques adapted such
13 an individual, including braille and other com-
14 munication skills, problem solving skills, re-
15 source management, and professional referrals
16 (as appropriate).

17 “(iv) Evaluation of such an individual receiving
18 training under clause (iii).”.

19 (c) PAYMENT.—Section 1833(a)(1) of such Act (42
20 U.S.C. 1395l(a)(1)) is amended—

21 (1) by striking “and” before “(S)”; and

22 (2) by inserting before the semicolon at the end
23 the following: “, and (T) with respect to vision reha-
24 bilitation services (as defined in section 1861(uu))
25 furnished by a vision rehabilitation professional, the

1 amount paid shall be 80 percent of the lesser of the
2 actual charge for the services or 85 percent of the
3 amount determined under the fee schedule estab-
4 lished under section 1848(b) for the same services if
5 furnished by a physician”.

6 (d) EFFECTIVE DATE.—The amendments made by
7 this section shall apply to services furnished on or after
8 the date of the enactment of this Act.

9 (e) CONSULTATION.—The Secretary shall consult
10 with the National Vision Rehabilitation Cooperative, the
11 Association for Education and Rehabilitation of the Blind
12 and Visually Impaired, and such other qualified profes-
13 sional organizations as the Secretary determines appro-
14 priate in promulgating regulations to carry out this Act.

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